



Falls Risk Reduction and Injury Prevention Program





Fall Risk Reduction Team

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Goal

- Fall risk reduction and prevention of injury is a major goal for the facility. Injurious falls not only impact quality of life for the residents but also increase acuity, cost and staffing needs.



Taking it to the local community

- The Merriman House joined efforts with Carroll County Health & Home Care, Visiting Nurses and Hospice Services of Northern Carroll County and Memorial Hospital by participating in the state wide initiative to develop a community wide approach to reduce falls in the elderly across all settings



Falls in Long-term Care

- Falls in long term care facilities are a major concern for residents, caregivers and families
- Consequently all nursing home have some type of fall prevention program in place
- However, injuries related to falls continue contribute to loss of independence, morbidity and mortality



Long Term Care

- The Merriman House was one of four long term care facilities in the state to participate in the Fall Risk Reduction/Injury Prevention Initiative
- Facilities shared existing strategies and used knowledge provided by NH Falls Reduction Task Force to improve programs



Challenges



Merriman House Fall Prevention Program

- Merriman House had a fall prevention program in place that included:
- Fall risk assessments completed on all residents on a periodic basis (admission, quarterly) with reevaluation after a fall
- Standardized risk assessment that examined medications, balance, continence status, medical conditions & cognitive status & history of falls



Merriman House Fall Prevention Program

- Comprehensive investigations of all falls by DNS
- Use of standardized fall interventions based on risk level
- Interventions included fall, bed and chair alarms, ½ checks, hip protectors, routine staff education, areas of high visibility, physical therapy as needed



Merriman House Fall Prevention Program

- All falls reviewed at weekly interdisciplinary team meetings
- Review of medication contributing to falls and fall risk
- Comparison of Merriman House to other facilities state and national benchmarks
- What was next???



Changes



Merriman House Safety Program

- The Merriman House Safety Program is a multilevel program involving commitment from leadership and staff alike. The intent of the program is to support quality care using practical, cost effective and proactive strategies to minimize resident and staff injuries



Purpose

- Improve the early identification of residents at risk for falls
- Design and implement preventative strategies to decrease fall incidence and minimize injury
- Balance the need for safety with the recognition of the need for independence and quality of life



Aims

- Individualize fall risk assessments and develop specific targeted interventions based on risks
- Change staff practice with emphasis on education, communication and collaboration



Resident Focus

- Expanded the risk assessment and identified the primary risk area for each resident
- Determined if the individual risk factors were alterable or controllable (medications, gait and balance, continence)
- Implemented individualized targeted interventions that coordinated with the restorative care program



Staff Focus

- Developed and educated core staff as resources and facilitators of program
- Emphasis was on “Promoting Best Practice”
- Committed Physical Therapy time for small group education using actual resident cases.



Strategies



Communication

- Resident involvement and education
- The majority of Merriman House residents have dementia. Involving residents with less memory impairment also helped promote a sense of worth and satisfaction from helping staff & the other residents with more needs



Communication

- Implemented multiple methods to inform staff of falls or changes in fall risk in a more timely fashion
- Use of verbal and written methods to communicate at all staff levels (bulletin boards, LNA flow sheets, staff meetings, nurse communication)



Alterable Factor?

Medications

- Worked on finding balance between appropriate medical treatment and fall risk
- Studies indicate elderly have under treated in many situations (pain, depression medical treatment). Yet we know medications are often connected to falls in the elderly
- More studies are needed to examine this relationship in the frail elderly population



Promoting Strength, Gait & Balance

- Physical therapy involvement to identify specific risk area and exercises to address concerns
- Restorative care activities included ambulation programs, rocking chair therapy, physical exercises via activity staff



Education

- LNAs are task oriented and skill focused. They learn best in small groups using practical demonstration with actual cases.
- Very successful use of one hour/week of PT to help staff with specific residents



Evaluation

- Quality Improvement is now a more active and dynamic process resulting in increased buy-in from staff.
- Staff confidence in ability to manage fall risk is increased.